

SUBDIVISION/SITE PLAN REVIEW APPLICATION

Town of Annsville Planning Board

FOR OFFICE USE ONLY

File No: _____

DATE OF APPLICATION REVIEW _____

WAIVED _____

APPLICANT INFORMATION:

DATE OF APPLICATION _____

NAME: _____ PHONE No: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP _____

E-MAIL ADDRESS: _____ FAX# _____

Present owner's name, address, phone # and email address:(Written permission to act on behalf of the owner)

Agent's name (if other than owner) addresses and phone #:

Surveyor's name, address and phone #:

Attorney's name, address and phone#

SUBDIVISION INFORMATION:

Type of Application:

Major Subdivision___Minor Subdivision___Lot Line Adjustment___

Site Plan Review ___ Other _____

Size of Project (Acres):_____Average Lot size:_____

of Lots to Be Created_____

Location of Subdivision: _____

Proposed Subdivision Name_____

Are there any recorded restrictions that apply to the land to be subdivided which are not shown on the plat? Yes___No___

Development Plans:

Sell Lots Only___Construct home(s) for sale_____

Commercial/Industrial_____Other (specify) _____

Is proposed land within 500' of a State Road or County Rd? _____

Is proposed land within 500' of any town line?_____

Does land border/cross another Town's line?_____

Is land within 500' of an Agricultural District containing a farm district?

Does the property lie in a watershed critical area?_____

Protected area?_____

PROPERTY INFORMATION:

Assessor's Parcel Number(s) _____

Current Land Use: _____

Surrounding Land Use: _____

Location of Proposed Access to Site: _____

List all names and addresses of ALL property owners who border the host parcel on all sides including across the road.

I certify that all information presented in this application is accurate to the best of my knowledge.

Signature of Property Owner or Developer

Date

Print Name

